

# EXHIBIT A

	A	B	C	D
13	CLAIMANT	CHECK DATE	CHECK AMOUNT	DEBTOR SOFA
14	PORTECK	1/4/2018	\$266,363.00	PHYSICIANS PRACTICE PLUS, LLC
15		12/20/2018	\$36,281.00	PHYSICIANS PRACTICE PLUS, LLC
16		1/19/2018	\$37,606.00	PHYSICIANS PRACTICE PLUS, LLC
17		3/7/2018	\$290,438.00	PHYSICIANS PRACTICE PLUS, LLC
18	90 DAY TOTAL		\$630,688.00	